PART B - FEE(S) TRANSMITTAL

Complete and send this form, together wan applicable fee(s), to: Mail Stop ISSUL REE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificate	correspondence including the contract of the c	for transmitting the ISS ng the Patent, advance of herwise in Block 1, by	UE FEE and PUBLIC orders and notification (a) specifying a new c	of maintenance orrespondence	e fees wi address;	ll be m and/or	nailed to the currer (b) indicating a se	nt corre parate	"FEE ADDRESS" for	
CURRENT CORRESPONDE	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission Via EFS-WE									
CESARI AND 88 BLACK FAL BOSTON, MA		P		States Postal S	/ that this ervice wi he Mail	s Fee(s) th suffi Stop 19	Transmittal is bei	ng dep i rst ela: s abov	osited with the United- is mail in an envelope is or being facsimile	
			Merisa Jakupovic					(Depositor's name)		
				Men	sa	Ja	angovi		(Signature)	
				October	24,	2/008			(Date)	
APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVEN	TOR		ATTOR	TTORNEY DOCKET NO.		CONFIRMATION NO.	
10/775,855 02/10/2004			Zafar Ali 112025-0540			12025-0540	1073			
TITLE OF INVENTION		· · · · · · · · · · · · · · · · · · ·								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	DUE PREV. PA		FEE	TOTAL FEE(S) DU		DATE DUE	
nonprovisional	NO	\$1440* \$15	10 \$0		\$0		-\$1440 \$1 5	10	10/24/2008	
EXAMINER		ART UNIT	ART UNIT CLASS-SUBCLA							
SAM, P	HIRIN	2619	370-392000							
1. Change of corresponde CFR 1.363).	2. For printing on	•			lCesari	and	l McKenna LLP			
☐ Change of corresp Address form PTO/SE ☐ "Fee Address" ind	ondence address (or Cha 3/122) attached. ication (or "Fee Address	or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to								
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is 3							
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print of	or type)						
PLEASE NOTE: Unl	ess an assignee is iden	tified below, no assigned pletion of this form is NO	e data will appear on t	he patent. If a	n assigne	e is ide	entified below, the	docum	ent has been filed for	
(A) NAME OF ASSIG		(B) RESIDENCE: (C								
Cisco Techno	ology, Inc.		San Jose, (CA						
Please check the appropr	iate assignee category o	r categories (will not be	orinted on the patent):	☐ Individual	Con	rporatio	on or other private g	roup e	ntity Government	
4a. The following fee(s): Issue Fee			4b. Payment of Fee(s):	`	apply any	y previ	ously paid issue fe	e show	n above)	
	lo small entity discount	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03_1237 (enclose an extra copy of this form).								
Advance Order -	# of Copies	**************************************	overpayment, to l	ereby authorized Deposit Accoun	t Number	ge the re r 03-1	equired fee(s), any (enclose	an ext	ra copy of this form).	
5. Change in Entity Sta	tus (from status indicate s SMALL ENTITY stat		☐ b. Applicant is no	o longer claimin	ig SMAL	L ENT	ITY status. See 37	CFR 1.	27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if recretords of the United St	uired) will not be accept ates Patent and Tradema	ed from anyone other t	han the applicar	nt; a regis	tered at	ttorney or agent; or	the ass	ignee or other party in	
Authorized Signature	\circ	and the		Date _	Octo		24, 2008			
	e James A. Bl	anchette		Regis	tration N	o	51,477			
This collection of inform	nation is required by 37 (CFR 1.311. The informat	tion is required to obtain	n or retain a ben	efit by th	e publi	c which is to file (a	nd by t	he USPTO to process)	

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.